STATEMENT OF ORGANIZATION		OFFICE USE ONLY 1/2	
1. Name and Address of Committee ALLIANCE FOR GOOD GOVERNMENT P O BOX 19566	2. Date of this Statement 02/05/2015	PAC S/D	
NEW ORLEANS LA 70179	3. Estimated Membership	2/7	5
Check if new committee	4. Amended Statement? Yes _XNo	# 892678 # 242	15001387
5. All Committee Officers and Directors (including Chairperson, Treasurer,	if any and any other committee		
Position Name	Address	omocra and an octors,	3 2
Chairperson			
Treasurer			
			Please see attached sheets.
6. Affiliated Organizations			
(Any organization, other than a political committee, which directly or inc			
Name Addre	ess	Relation	ship to Committee
7. All Depositories for Committee Funds (committee funds must be deposit	ed in one or more banks or savi	ngs and loan institutions)	Please see attached sheets.
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Name Addr.	ess		
			P - 2 C - 2
			Please see attached sheets.
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a.	Check one: Principal C	ampaign Committee	Subsidiary Committee
b. Name of Candidate	c. Office Sought by the Cand	lidate	entropy of the second
			Annual Control of the
		-	Please see attached sheets.
9. Name of Person Preparing Report		Daytime Telephone	Please see attached sheets.
10. WE HEREBY CERTIFY that the information contained in this STATE and belief.	EMENT OF ORGANIZATION	is true and correct to the b	est of our knowledge, information
and benet.			
Dated <u>02/06/2015</u> .			
TIM FANDAL		985 966 0644	
Signature of Committee Chairperson		Daytime Telephone Numb	per
SHANNON SIMS Signature of Committe Treasurer, if any		504 228 3656 Daytime Telephone Numb	ner

Form 200, Rev 3/98